

# STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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OCT 25 2017

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s):	Paul A. Worsowicz; Erik W. Ta Heidi L. Kroll; Sara K. Bosiak	ylor; Lisa K. Shapiro, Ph.D.; Ari B. Pollack;
II. Name of Lobbyist's partn	ership, firm or corporation, if any:	
603-228-1181	GALLAGHER, CALLAHAN 214 North Main Street, Co 603-226-347	oncord, NH 03301
(Telephone)	(Fax)	(Email)
reportable expense transaction	ons which are not attributable to any	
All reportable transacti	ons occurring in the month prior to the	e reporting date relative to the following client.
	AGGREGATE MANUFA	
(Ful	Name of Client as it appears on the L	obbyist Registration Form)
All reportable transaction unrelated to any particular	ons by the lobbyist (including the lobbular client.	oyist's family), or the lobbying firm listed below which are
IV. Date of Report:	pril 26, 2017 🔲	July 26, 2017 □
	om date of registration to 3/31/17	activity from 4/1/17 to 6/30/17
•	october 25, 2017 🗵	January 24, 2018 □
	from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31/17
V. There have been no fees a If this box is checked. complete Concord. NH 03301.	eceived and no reportable transactive just this form and submit it to the Se	ons made since the last report.  cretary of State's Office, State House, Room 204,
VI. Check if additional report X If you have received for	orts are attached: es or made expenditures, you must fil	e Addendum A – Fees and Expenses
If you have paid an ho	ent	must file Addendum B - Report of Honorariums or
If you, your firm, or y	our family has made political contribu	tions, you must file Addendum C – Political Contribution
Sworn Statement/Affirmation I have read RSA 15, RSA 15- to the best of my knowledge a	B and RSA 664 and hereby swear or a	ffirm that the foregoing information is true and complete
Part Cilla	money	/0つ2ラップ (Date)
(Signature of Lobbyist)		(Date)
Paul A. Worsowicz (Print Name of lobbyist)	-	



### STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

	(RSA Chapter 15:6)			
I. Name of Lobbyist(s)	Paul A. Worsowicz; Erik W. Taylor; Lisa K. Shapiro, Ph.D.; Ari B. Pollack; Heidi L. Kroll; Sara K. Bosiak			
II. Name of lobbyist's	partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRE	LL, P.C.		
	(Name of partnership, firm or corporation	n)		
III. Name of Client	AGGREGATE MANUFACTURERS OF NH	Date	October 25	5, 2017
lobbying, including fees including research, mon by any expenses:	nt of all fees received from the client identified above t for services such as public advocacy, government rela itoring legislation, and related legal work. The gross for	tions, or	public relation	ns services, all not be reduced
a) Total of all fees received	ved in this reporting period		a) \$	9,037.50
	ived this calendar year, prior to this reporting period. he total prior monthly reports for this calendar year.)		b) \$	27,925.00
c) Total of all fees rece (Add lines a and b)	ived to date.		c) \$	36,962.50
d) Indicate the amount yet been paid.	of any such fees that are due, but have not		d) \$	.00.
fees. Separate reports a	partnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each clumerated to any one client a separate report may be	ient and	if expenditure	es are made by the

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ b) \$	9,000.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.		.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 	.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: AGGREGATE MANUFACTURERS OF NH		
d) Total expenses for this reporting period. (Add lines a, b and c.)	d)\$	9,000.00
e) Total of expenses paid this calendar year, prior to this reporting period.  (This should be the amount on line f of addendum A for last month's report.)	e) \$	29,837.50
f) Total of all expenses year to date.	f) \$	38,837.50
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbyi period, including by whom paid or to whom charged.	ng fees during this	reporting
Paid to:	Am	ount
	\$	
	\$	<del></del>
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that is true and complete to the best of my knowledge and belief.	nt the foregoing i	nformation
(Signature of lobbyist)	/0-23-/ (Date)	·7

Paul A. Worsowicz
(Print Name of Lobbyist)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:					
			AHAN & GARTRELL, P.C.		
Name of Client (leave leave leave): _A	Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  Aggregate Manufacturers of NH				
Date of Report (check	one):				
April 26, 2017 🗆	July 26, 2017 □	October 25, 2017 🔀	January 24, 2018 □		
I have read RSA 15, R following Addendums submitted):	SA 15-B, RSA 664, the S submitted with that State	tatement of Income and Exponent (insert the number of A	enses described above, and the addendum forms being		
1 Addendum A(s).					
0 Addendum B(s).					
0 Addendum C(s).					
I hereby swear or affir complete to the best of (Signature of Lobbyis	f my knowledge and belie	rmation on the Statement and	l each Addendum is true and  / D   18/17 (Date)		
Erik W. Taylor (Print Name of lobby	vist)				

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:				
Name of Lobbying p	oartnership, firm or corpor	ation: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.	
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  Aggregate Manufacturers of NH				
Date of Report (che	ck one):			
April 26, 2017 🗆	July 26, 2017 □	October 25, 2017 🔀	January 24, 2018 □	
I have read RSA 15, following Addendur submitted):	, RSA 15-B, RSA 664, the ns submitted with that Sta	Statement of Income and E tement (insert the number o	expenses described above, and the f Addendum forms being	
1 Addendum A(	s).			
0 Addendum B(	s).			
0 Addendum C(	s).			
I hereby swear or af complete to the best	firm that the foregoing inf t of my knowledge and be	formation on the Statement a lief.	and each Addendum is true and	
(Signature of Lobb  Lisa K. Shapiro, P	h.D.		10/25/17 (Date)	
(Print Name of lob	obyist)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:				
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  Aggregate Manufacturers of NH				
Date of Report (chec	ck one):			
April 26, 2017 □	July 26, 2017 □	October 25, 2017 🔀	January 24, 2018 □	
		Statement of Income and Externent (insert the number of	xpenses described above, and the Addendum forms being	
1 Addendum A(s	3).			
0 Addendum B(s	s).			
0 Addendum C(s	3).			
	firm that the foregoing inf of my knowledge and bel		nd each Addendum is true and	
(Signature of Lobby	vist)		1 = 23 17 (Date)	
Ari B. Pollack (Print Name of lob)	,			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:				
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Aggregate Manufacturers of NH				
Date of Report (check one):				
April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☒ January 24, 2018 ☐				
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):				
1 Addendum A(s).				
0 Addendum B(s).				
0 Addendum C(s).				
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.				
(Signature of Lobbyist) (Date)				
Heidi L. Kroll (Print Name of lobbyist)				

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Aff Statement of Income	•		
Name of Lobbying par	tnership, firm or corpor	ation: GALLAGHER, CAL	LAHAN & GARTRELL, P.C.
Name of Client (leave particular client):	blank if Statement is for Aggregate Manufactur	r the partnership, firm, or corers of NH	poration and not related to any
Date of Report (check	one):		
April 26, 2017 □	July 26, 2017 🗆	October 25, 2017 🗵	January 24, 2018 □
I have read RSA 15, R following Addendums submitted):	SA 15-B, RSA 664, the submitted with that Sta	Statement of Income and Externent (insert the number of	spenses described above, and the Addendum forms being
_l_ Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
	m that the foregoing inf f my knowledge and bel		nd each Addendum is true and
Sarak. B	soul		10/20/17
(Signature of Lobbyis	st)		(Date)
Sara K. Bosiak (Print Name of lobby	vist)		